

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000006115 (9)

1. Corporation Name

**PRATT & WHITNEY AIRCRAFT FLORIDA OPERATIONS EMPL
OYEEES' CLUB, INC.**



Principal Place of Business

Mailing Address

STATE RD. 710
17900 BEE LINE HWY
JUPITER FL 33478

P.O. BOX 109600
M/S716-08
WEST PALM BEACH FL 33410

3. Date Incorporated or Qualified
12/13/1994

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HENNEBERGER, JOHN A
4 CARRICK RD.
PALM BEACH GARDENS FL 33418**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DP	☐ DELETE
NAME	GALL, IDA	
STREET ADDRESS	2936 RANCH HSE RD	
CITY-ST-ZIP	WPB FL 33406	
TITLE	DV	☐ DELETE
NAME	SMITH, WILBERT	
STREET ADDRESS	3815 HEATH CIRCLE SOUTH	
CITY-ST-ZIP	WEST PALM BEACH FL 33407	
TITLE	DT	☐ DELETE
NAME	CAPUTE, RON	
STREET ADDRESS	17654 121ST TERRACE NORTH	
CITY-ST-ZIP	JUPITER FL 33478	
TITLE	DS	☐ DELETE
NAME	JOHNSTON, PAIGE	
STREET ADDRESS	509 S CAROLINA DRIVE	
CITY-ST-ZIP	STUART FL 34994	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D/P	☒ Change ☐ Addition
1.2 NAME	Cathy Roberson	
1.3 STREET ADDRESS	4752 Badger Avenue	
1.4 CITY-ST-ZIP	West Palm Beach, FL 33407	
2.1 TITLE	D/V	☒ Change ☐ Addition
2.2 NAME	Ida Gall	
2.3 STREET ADDRESS	2936 Ranch House Road	
2.4 CITY-ST-ZIP	West Palm Beach, FL 33406	
3.1 TITLE	D/T	☒ Change ☐ Addition
3.2 NAME	Richard Callahan	
3.3 STREET ADDRESS	138 Waterway Road	
3.4 CITY-ST-ZIP	Royal Palm Beach, FL 33411	
4.1 TITLE	D/S	☒ Change ☐ Addition
4.2 NAME	Patricia McClung	
4.3 STREET ADDRESS	4081 Cottonwood Avenue	
4.4 CITY-ST-ZIP	Palm Beach Gardens, FL 33410	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Cathy H. Roberson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/96
Date

407 796 1175
Daytime Phone #

CR2E037 (12/95)